ISDH 2004 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

Saint John's Health System

City: Anderson County: Madison Year: 2004

Provider Type: General Acute Hospital

I. Inpatient Care				
Hospital Service Description				Average Charge Per Discharge
Burn Care	0	0	0	\$0
Cardiac Intensive	0	0	0	\$0
ICU Med/Surg	20	684	4,840	\$5,508
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	81	4,613	21,581	\$2,408
Neonatal Intermed	0	0	0	\$0
Obstetrics	10	564	1,300	\$1,226
Pediatric	0	0	0	\$0

Psychiatric	0	0	0	\$0
Rehabilitation	41	1,826	9,921	\$4,086
Substance Abuse	19	328	3,880	\$6,565
Swing Beds	NA	0	0	\$0
Other Services	0	0	0	NA
Acute Subtotal	171	8,015	41,522	NA
Normal Newborn	10	464	1,068	\$1,072

II. Outpatient Visits				
Circulatory System	14,846	Digestive System	6,322	
Endocrine System	16,958	Injuries and Poison	10,832	
Mental Disorder	3,373	Musculoskeletal	19,057	
Neoplasms	7,416	Nervous	8,001	
Respiratory	8,742	Urinary	12,191	
Other/Unknown	57,268	Total Visits	165,006	
Number of Visits to Emerg	35,022			
Percent of Emergency Department Visits of Total Visits			21.2%	

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Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 66 services. This list of 52 services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment. The other 14 services have been identified in other sections of this report.

N - Ambulance Service (Owned)	Y - Alcohol/Drug Service	Y - Anesthesia Services
N - Audiology	Y - Blood Bank	N - Cardiac Cath Lab
N - Cardiac-Thoracic Surgery	N - Chemotherapy Service	N - Chiropractice Service
N - CT Scanner	Y - Dental Service	Y - Dietetic Service
N - Extracorporeal Lithotripter	N - Gerontological Service	Y - Home Health Service
Y - Hospice	Y - Laboratory Anatomical	Y - Laboratory Clinical
N - Magnetic Resonance (MRI)	N - Neonatal Nursery	N - Neurosurgical Service
Y - Nuclear Medicine	Y - Occupational Therapy	Y - Operating Room
N - Opthalmic Surgery	N - Optometric Service	N - Organ Bank
N - Organ Transplant	N - Orthopedic Surgery	Y - Pharmacy
Y - Physical Therapy	N - PET Imaging	Y - Postoperative Recovery
N - Psychiatric Emergency	N - Psychiatric Child	N - Psychiatric Forensic
N - Psychiatric Geriatric	Y - Radiology Diagnostic	Y - Radiology Therapeutic
N - Reconstructive Surgery	Y - Respiratory Care	N - Rehab Inpat CARF
Y- Rehab Inpat Non CARF Acc	N- Rehab Outpatient	N- Renal Dialysis

Y - Social Services	Y - Speech Pathology	Y - Surgical Inpatient
Y - Surgical Outpatient	N - Trauma Center Certified	N - Transplant Cnt Medicare
N - Urgent Care Center		

NA =	Not applicable	NMF =	No meaningful figure NR =		Not reported

<u>Health Care Regulatory Services</u>

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